

LOEWY (A.)

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OF  
**Edward Shannon.**

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BY  
**ARTHUR LOEWY, M. D.**

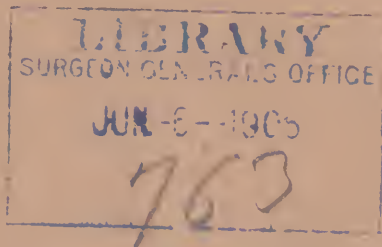
Formerly Superintendent of the Illinois Northern Hospital for  
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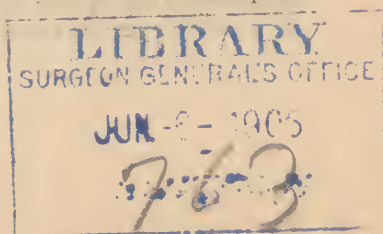
BY  
ARTHUR LOEWY, M.D.

Formerly Superintendent of the Illinois Northern Hospital for  
the Insane, and Chief of the Medical Staff of the  
Cook County Insane Asylum.

The case of Edward Shannon who was found insane after judgment had been pronounced upon him possesses great medico-legal interest.

Edward Shannon killed his wife with a pistol shot in a railway car at Belvidere, Ill.

The prisoner on being brought to trial took a change of venue from Boone to DuPage County, and being without means Messrs. Cooper & Goodrich of the DuPage County Bar were appointed to defend him. From the beginning of their connection with his case they were suspicious that the man was mentally unbalanced. The indifference of manner, his lack of interest as to what might befall him, his accusations against the wife to whom he had been married for forty years aroused doubts as to his sanity. The Prisoner when pressed would tell his Counsel of persons who might aid him, but when these peo-



Dr. Clevenger makes a similar statement, concerning the case of Louis Lingg, in his work on Medical Jurisprudence of Insanity. Shortly before the trial I enlisted the aid of Dr. C. V. Massey of Chicago and Dr. Henry J. Gabagan of Elgin, who had been my assistant during my term of service as Superintendent of the Northern Hospital for the Insane at Elgin. Both of these gentlemen at separate examinations arrived at the same conclusions that I did.

The trial took place at Wheaton, Ill., Judge C. H. Bishop presiding. The State was represented by the State's Attorney of Du Page County and Hon. John Russell of Elgin. The Prisoner was represented by the Hon. E. H. Gary, Messrs. Cooper & Goodrich having retired that they might become witnesses for the defense. The evidence introduced in behalf of the Prisoner showed the facts as to the two head injuries; the irritable and quarrelsome temperament; the over-indulgence in the use of alcoholics with periodic exacerbations; his suspicions of his wife's infidelity; an attempt at arson; acts of brutality toward his family, etc. The medical testimony on the part of the Prisoner was that the man was suffering from paranoia following traumatism. The lay testimony on the part of the State established the fact that the man had been a drunkard, that his actions had been outrageous and that he was known as a "holy terror."

The expert witnesses on the part of the State were Drs. Brooks and Hamilton. They had not heard the testimony given on behalf of the Prisoner and had never talked with the man concerning his family matters. Had they examined him thoroughly I do not see

how any other conclusion could have been reached by them than that the man was insane. They believed the man was malingering, but failed in their evidence to produce any symptoms to bear out their contention.

The jury, in about eight minutes, found the prisoner insane, and he was, by order of Court, taken to the Asylum for the Criminal Insane at Chester. I believe this is the first case of the kind in Illinois, in which the prisoner was found insane after judgment and sentence had been pronounced. The provisions of the Statute in question have been invoked, as in the Prendergast case, but without success. On this account, this case, to my mind presents unusual interest,

In a careful review of the case, we find that paranoia may follow traumatism; that head injuries are important in their remote, as well as in their immediate effect upon the system. A fracture, either simple or compound, receives immediate surgical treatment, but blows or falls rendering the person unconscious, but with slight objective symptoms, are very liable to produce disastrous results ultimately. A layman may notice the change wrought in a person by injuries of this character. The change in temperament, the irritability and impatience manifested, the sluggish mentality and the susceptibility of these head injury cases to the action of alcohol are all characteristic.

So, in this case, we have all the elements necessary to a disturbance of mental equilibrium. The evidence showed that as the patient became more and more addicted to the use of alcohol the more outrageous did his actions become, and then we notice the suspicions of marital infidelity always characteris-

tic to the alcoholic being engrafted on his mental state. All the time that he was accusing his wife of infidelity he was sending persons to her asking her to again live with him, a separation having taken place some time before

Mickle has referred to the fact that paranoia may result from head injury, in an article appearing in Tuke's Psychological Dictionary. He describes patients of this class as being moody, unsociable, ill-tempered; he further states that the alcoholic complication is shown by delusions of conjugal infidelity; further: "Brutality to spouse, children or friends and homicidal impulses may be manifested."

It would appear, after considering the history of this case, together with the symptoms manifested, that we have a clinical picture so evident of insanity that expert witnesses should not disagree.

The question of simulation of insanity as claimed by the State deserves attention.

Norman states in relation to feigned insanity: "In cases where simulation is suspected we are generally told that we ought to be on the lookout for a motive. But this is hardly the proper attitude for the physician, and by attributing too much importance to motive, or supposed motive, grave injustice may be done. A drunken vagabond, with, perhaps, a bad family history, and probably a bad bringing-up, and with an infamous record, will, after he has ruined himself or incurred the risk of severe punishment, appear to have a motive for shamming insane; but we must also remember that he is a person in whom we would have every reason to expect the appearance of insanity."

We must, therefore, put aside the question of motive, and determine whether the symptoms present and their mode of onset are natural, to arrive at a just and scientific opinion.

Insanity is not easily feigned. Impostors will always overdo their part. The person is determined that his insanity should not be overlooked for want of numerous acts indicative of mental disease. Paranoia is seldom simulated. The fact that there exists a ruling delusion or delusions which must be discovered by the interrogator does not suit the simulator, whose desire is that no one can doubt his insanity for want of insane actions.

The simulator of paranoia, when his attention is called to the absurdity of his delusions and their inconsistency with other statements, will not attempt to reconcile them with rational ideas. The paranoiac will resent contradiction of his statements, even so far as to offer violence to one who opposes his ideas. He will never falter in his statements, but the more argument to the contrary, the longer will he hold to his opinions. The successful simulator must be versed in the symptomatology of the form of insanity he attempts to simulate, either by an acquaintance with literature on this subject or by practical experience with insane persons.

Edward Shannon could neither read nor write; he had never been employed in caring for an insane person, nor had he ever been employed in a hospital for the insane.

I must, therefore, conclude that the symptoms which he presented were so characteristic and typical, that their onset and course were so consistent that he is undoubtedly in-

sane. Judge Bishop rightfully and justly permitted evidence to be admitted of acts, etc., before the commission of the crime which had a bearing on his present mental condition.

Every Alienist should rejoice at the outcome of this case. It is an indication of an advance in the treatment accorded the insane who commit crime. The law was not violated, but vindicated.

Unsuccessful attempts have been made previously to avert the hanging of insane men, not that they were not ably defended, but, influenced by clamor, the opinions of renowned Alienists have been brushed aside and legal murder committed.

But, as physicians we owe much to the people of DuPage County, who, through twelve citizens, turned a deaf ear to the clamor for revenge and dealt justly with an insane man.

The conduct of the Prisoner's case by Judge Gary was, as everyone acquainted with his abilities knows, most able; added to his thorough knowledge of the law, he possesses a knowledge of psychological medicine which is gained only by patient and conscientious study.

The outcome of this case should set a precedent that cannot be put aside, and it is hoped that its influence will not only extend over Illinois, but to other States, to the end, not that anyone should escape just punishment, but that the law should be supreme, and no insane person suffer penalty.





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